STATEMENT OF

PAGE 1 / 4 =

FORM 1		ORG	ANIZA	TIOI	V									
NAME OF COMMITTEE (ir	n full)	(Check is chang		Examp over th	le:If typing,	type	12	FE4N		office Us	se Only			_
OHIO GUN (•		-			CAL .	ACT	ION	CC	MM	IITTI	EE(SSF	=)
ADDRESS (number a	nd street)	PO BOX 670406	;											
(Check if a is changed														
is changed)		SAGAMORE HII	LLS				L ^{OI}	d TE ▲	44	067	ZIP	- L	·	
COMMITTEE'S E-MA	AIL ADDRES						017				211	OODL	_	
(Check if a is changed		anita@ogca.	.com											
		Optional Second		ress										
COMMITTEE'S WEE (Check if a is changed)	address	RESS (URL)												
2. DATE 1	0 01	2021	Y											
3. FEC IDENTIFIC	CATION NU	MBER ▶	C coo)316455										
4. IS THIS STATE	MENT	NEW (N)	OR	×	AMENDE	ED (A)								
I certify that I have o	examined thi	s Statement and	to the best o	of my kno	wledge and	d belief it	t is true	, corre	ect an	d com	plete.			
Type or Print Name	of Treasurer	Kirian, Rodney,	, Mr.,											
Signature of Treasure	er <i>Kirian</i> , ——	Rodney, , Mr.,		[El	ectronically l	Filed]	Date	М	08	1	2	20	022	Y
NOTE: Submission of	false, errone	ous, or incomplete		-						penal	ties of	52 U.S	s.C. §30	O109.
Office Use Only				Fe To	r further info deral Election I Free 800-42 cal 202-694-1	Commiss 24-9530						PRM 06/2012)		

FE	Form 1 (Revised 03/2022)	Page 2				
j.	TYPE OF COMMITTEE:					
Candidate Committee:						
	a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete t information below.)	he candidate				
	Name of Candidate					
	Candidate Office Sought: House Senate President	State District				
	c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
	Party Committee:					
	d) This committee is a (National, State or subordinate) committee of the Republican	tic, n, etc.) Party				
	Political Action Committee (PAC):					
	e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ted organization is a:				
	Corporation Corporation w/o Capital Stock Labor	Organization				
	Membership Organization Trade Association Coope					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed fund or party				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	(g) This committee is an independent expenditure-only political committee (Super PAC).					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).				
	In addition, this committee is a Lobbyist/Registrant PAC.					
	Joint Fundraising Representative:					
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
	Committees Participating in Joint Fundraiser					
	1C					
	C					

•	FEC Form 1 (Revised 0	2/2009)	Page 3				
٧	/rite or Type Committee Name						
		ECTORS ASSOCIATION POLITICAL ACTION	, ,				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor OHIO GUN COLLECTORS ASSOCIATION						
		P.O. BOX 406					
	Mailing Address						
		SAGAMORE HILLS OH	44067				
		CITY ▲ STATE ▲	ZIP CODE ▲				
	Relationship: X Connected	Organization Affiliated Organization Joint Fundraising Represer	ntative Leadership PAC Sponso				
	_		_				
7.	Custodian of Pacards: Identi	fy by name, address (phone number optional) and position of the pers	ean in passassion of committee				
<i>'</i> .	books and records.	ty by frame, address (phone number optional) and position of the pers	on in possession of committee				
	Knotts, Lau	ra, , Mrs,					
	Full Name						
	Mailing Address	PO Box 670406					
		1					
		Sagamore Hills OH	44067				
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲				
	Treasurer		330 467 5733				
		Telephone number					
8.	Tracurary list the name and	d address (phone number optional) of the treasurer of the committee	ee; and the name and address of				
Ο.	any designated agent (e.g., a		se, and the name and address of				
	Full Name Kirian, Rod	ney, , Mr.,					
	of Treasurer						
	Mailing Address	PO Box 670406					
		I					
		Sagamore Hills OH	44067				
	Title or Position ▼	CITY ▲ STATE ▲	ZIP CODE ▲				
	Treasurer		330 467 5733				
		Telephone number					

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Rieger, Anita, , ,	
Mailing Address	P.O. Box 670406	
	Sagamore Hills OH	44067
	CITY ▲ STATE	▲ ZIP CODE ▲
Title or Position		
Assistant Treasu	rer Telephone number	440 - 653 - 1544
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the committee depositories or maintains funds.	its funds, holds accounts, rents
Name of Bank, I	Depository, etc.	
	Huntington National	
Mailing Address	PO Box1558 EA1 W37	
	Columbus	43216-1558
	CITY ▲ STATE 4	▲ ZIP CODE ▲
Name of Bank, I	Depository, etc.	
Mailing Address		
	CITY ▲ STATE A	∑IP CODE ▲